Application for Membership Housing Counseling Federal Advisory Committee (HCFAC)

## U.S. Department of Housing and Urban Development Office of Housing Counseling

OMB Approval #:2502-0606 Exp 11/30/2016

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## APPLICATION FOR MEMBERSHIP ON THE HOUSING COUNSELING FEDERAL ADVISORY COMMITTEE (HCFAC)

The purpose of the HCFAC is to provide advice regarding the carrying out of the functions of the Office of Housing Counseling (OHC). The Committee shall consist of no more than 12 individuals. The membership will equally represent the mortgage and real estate industry including consumers, and housing counseling agencies certified by the Secretary.

PLEASE TYPE OR WRITE LEGIBLY. THIS FORM MAY BE SUBMITTED BY MAIL OR ELECTRONICALLY.

Address: (Home)	
	ate:Zip code:
Email: (Personal)(	(Business)
Telephone #:	Cell phone #:
Internet: 🗆 Yes 🗆 No	nication technologies for meeting, do you have access to the $oxdot$ : $oxdot$ Yes $oxdot$ No (If you do not have access, your application will still be
considered)	
If you are employed: Employer:	
Address:	
Duties:	
Do you have any licenses/certifications appro	ropriate to your occupations?   Yes No
Our goal is to have the HCFAC reflect the diprovide the following demographic informations	diversity of our customers. To assist us we are asking you to voluntarily tion.
Ethnicity: 🗌 Hispanic/Latino 🗌 Non-Hispan	nic/Latino
Race (Select one or more):   American Hawaiian/Other Pacific Islander   White	Indian/Alaska Native $\square$ Asian $\square$ Black/African American $\square$ Native
Gender: ☐ Male ☐ Female ☐ Transgender	

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Age		
Military Service: 🗆 Veteran 🗆 Active Duty Military 🗆 None		
Will you need any special accommodations in order to serve on the HCFAC? $\square$ Yes $\square$ No		
To ensure that we have housing diversity on the HCFAC, please describe your current housing circumstances (own, rent, housing type, etc.):		
To ensure that we have geographic diversity on the HCFAC, please describe the community or neighborhood in which your home and/or business is located.		
Briefly provide any other information about yourself that you feel is important to your contribution to the diversity o		
Attach an explanation as to why you want to be a member of the HCFAC and what unique experiences, skills and knowledge you will bring to the committee. Please limit your response to one page. Also include your resume.		
Members will be required to adhere to the conflict of interest rules applicable to Special Government Employees as such employees are defined in 18 U.S.C. Section 202(a). The rules include relevant provisions in 18 U.S.C. related to criminal activity, Standards of Ethical Conduct for Employees of the Executive Branch (5 CFR part 2635), and Executive Order 12674 (as modified by Executive Order 12731).		
I agree to any pre-appointment screening relating to identity of interest and financial interests that HUD migh require as shown above. I understand that I will be asked to complete form OGE-450 (Confidential Financia Disclosure Report)		
Signature: Date:		

Applications should be submitted in sufficient time to be received by the close of business on the closing date and be addressed to e-mail address: <a href="mailto:marjorie.a.george@hud.gov">marjorie.a.george@hud.gov</a> or by mail to: Marjorie George, Senior Housing Program Officer, Office of Housing Counseling, Office of Outreach and Capacity Building, U.S. Department of HUD, 200 Jefferson Avenue, Suite 300, Memphis TN 38103.

The application deadline for interested candidates will be May 14, 2015.